	PAT			plication or Docket Number							
	А	PPLICATION (Colu	AS FILE		lumn 2)		SMALL ENTITY			OTHER SMALL	
	FOR	NUMB	ER FILED	NUMBE	NUMBER EXTRA		TE (\$)	FEE (\$)]	. RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))					•						
SEA	RCH FEE								1		
(37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE									ł		<u> </u>
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS						<u> </u>			ł		
	CFR 1.16(i))	1140	minus 20) = *		×	=		OR	X =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3			х	=			x =	
FEE	PLICATION SIZE CFR 1.16(s))	sheets of is \$250 (\$ additiona	and drawings enter application signall entity) for the or fraction the office and 37 CFF	ze fee due each ereof. See							
MUL	TIPLE DEPENDI	ENT CLAIM PRES	SENT (37 C	FR 1.16(j))						·	
* If t	he difference in c	olumn 1 is less tha	ın zero. en	ter "0" in column :	2.		OTAL		1	TOTAL	
									•		
\vdash	APPL	ICATION AS	AMEND	EU – PART II						OTHER	TUAN
<u></u>	1001	(Column 1)	(Column 2)	(Column 3)		SMALL I	ENTITY	OR	SMALL		
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.18(i))	19	Minus	<i>"20</i>	=	х	=		OR	x =	
2	Independent (37 CFR 1.16(h))	. 9	Minus	··· (9.	-	х	ıı		OR.	x =	
	Application Size	e Fee (37 CFR 1.1	6(s))]		
	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF			:	OR			
				, "	TOT	AL 'L FEE		OR	TOTAL ADD'L FEE		
<u> </u>		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	•	Minus	**	=	x	п		OR	x =	
	Independent (37 CFR 1.16(h))	*	Minus	***	=	×	=		OR	х =	
ᄬ	Application Size	Fee (37 CFR 1.1	6(s))]			
	FIRST PRESENT	ATION OF MULTIPLI				OR					
						TOT ADD	AL 'L FEE	<u> </u>	OR	TOTAL ADD'L FEE	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". 											

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 Applicationyer Docket Number 10 603 41-9 Section 2003 41-9												7. 1						
CLAIMS AS FILED - PART I (Column 1) (Column 2)												SM/	ALL EI			OR	OTHER	
TO	TAL CLAIMS		16						1	RATE		FE	E		RATE	FEE		
FO	R		NUMBER FILED			NUMBER EXTRA				BASIC FEE 3		375.	00	OR	Basic Fee	750.00		
το:	TAL CHARGEA	S	16 minus 20=			•	0			X\$ 9=				OR	X\$18=	0		
INDEPENDENT CLAIMS					5 minus 3 =			2				X42=				OR	X84=	168
MULTIPLE DEPENDENT CLAIM PRESENT								+140=				OR	+280=	0				
• 11	* If the difference in column 1 is less than zero, enter "0" in column 2									•	TOTAL				OR	TOTAL	98	
CLAIMS AS AMENDED - PART II																		
<u>8</u>	5-5-05 (Column 1) (Column 2) (Column 3)								SI	MALL	ENTIT	Υ	OR	SMALL				
ENT A		CLAIMS REMAINING AFTER AMENDMENT		_	HIGH NUMI PREVIC PAID			BER CUSLY	PRESENT EXTRA			R	ATE	ADI TION FE	AL		RATE	ADDI- TIONAL FEE
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AME	Independent	•	عا	Minus ***			*** (5	F /			X42=				OR	200	200.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									j		140=			OR	340	3600		
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	(Column 1) (Column 2) (Column 3)										ADD	IT. FEE	<u> </u>			addit, pee	270.00	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		_	N PRE		PREVE			RESENT EXTRA		R	ATE	ADE TION FE	IAL		RATE	ADDI- TIONAL FEE
Š	Total	•			Minius		**		5]	X	\$ 9=			OR	X\$18=	
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					/							ADD	YOYAL HT. FEE			OR	ADDIT. FEE	
			CLAIMS	1) /		***	(Colu	mn 2)	(Co	lumn 3	,					,		
ENT C		RE	MAININ AFTER ENDME	1/			NUM PREVI	BER OUSLY FOR		PRESENT EXTRA		A	ATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE
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ட்	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									į		140=				+280=		
. 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										L_	TOYAL			OR OR	TOTAL		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																		
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